

Form DC-195A

Commonwealth of Pennsylvania  
Department of Corrections

OCT 19 2022

## INMATE'S REQUEST TO STAFF MEMBER

## MISCONDUCT APPEAL

1. To: (Name and Title of Officer)

SCI - FYT PRC

3. By: (Print Inmate Name and Number)

T. MONTANA BELL # LD5447

*ANOB*

Inmate Signature

6. Work Assignment

2. Date:

10/12/22

4. Counselor's Name:

*JCPM*

5. Unit Manager's Name:

OCT 20 2022

7. Housing Assignment:

*JD*

8. Subject: State your request completely but briefly. Give details.

APPEAL OF THE MISCONDUCT # D466536

MR. BELL DO HAVE A CELLY AND IS BEGGING THAT THIS WHITE DUDE IS REMOVED FROM HIS CELL AND THAT MR. BELL IS STAFFED FOR A Z-CODE, BECAUSE HE FITS THE CRITERIA OUTLINED IN DC-ADM 11.2.1 SEC.5.

I'LL AWAIT YOUR TIMELY RESPONSE

IN TRUTH & SPIRIT  
OF MAAT.CC: DAVID W. CORNISH, ESQ.  
JOSEPH M. HAUSCHILD, ESQ.  
MICHAEL VAN DER VEEN, ESQ.

This ~~misconduct~~ Misconduct was exaggerated. You cannot appeal a misconduct that was exaggerated.

To DC-14 CAR only To DC-14 CAR and DC-15 IRS STAFF MEMBER NAME *Anjan*

Print

*OB*

Signature

DATE 10/20/22